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APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	АТТО	RNEY DOCKET NO.
08/888,609				
		EXAMINER		
			ART UNIT	PAPER NUMBER
	INTERV	EW SUMMARY	DATE MAILED:	
All participants (applicant, applicant	t's representative, PTO personnel):		
(1) Mr. Briscoe		(3)		
(2) Allen Robins	on	. (4)		
Date of Interview 12-3		<u> </u>		
Type: Telephonic Personal	copy is given to applicant	Applicant's representative). ·	•
Exhibit shown or demonstration cor	nducted: Yes No If yes, t	orief description:	•	
Agreement ☐ was reached. ☐ w	as not reached.			·
Claim(s) discussed:			. "	·
Identification of prior art discussed:				
·				
Description of the general nature of CASE may be possible inter	suspended			iding a
Claims 15 and 1		o "products"	s how lil	he chaceled
(A fuller description, if necessary, a must be attached. Also, where no cattached.)	nd a copy of the amendments, if a copy of the amendments which wo	available, which the examiner	agreed would rende le is available, a sur	r the claims allowable nmary thereof must be
1. It is not necessary for applica	nt to provide a separate record of	the substance of the interview	W.	
Unless the paragraph above has be IS NOT WAIVED AND MUST INCLU action has are ready been filed, API SUBSTANCE OF THE INTERVIEW	UDE THE SUBSTANCE OF THE PLICANT IS GIVEN ONE MONTH	INTERVIEW. (See MPEP Se	ction 713.04). If a re	sponse to the last Office
	hat may be present in the last Off conse requirements of the last Off	ice action, and since the clain	ns are now allowable	, this completed form
Examiner Note: You must sign this f	form unless it is an attachment to	another form.	Rele & A	2~
FORM PTOL-413 (REV.1-96)		_	- 1	·